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Bib Data Sheet

CONFIRMATION NO. 4951

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|------------------------------------------------------------------------------------------|--------------------------------------------------------|-----------------------------------------|------------------------------------------------|---------------|-----|----------------------------------------------------------------------------------------------|------------------|-------------------------------------------|-------------|--|
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| ** CONTINUING I ** FOREIGN APPI IF REQUIRED, FO ** 05/15/2004 | LICAT | lan | ** iRANTEC |) | | | | | · | |
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| met Verified and Acknowledged | | yes and Met after | Allowance | COUNTRY MN | DF | DRAWING 17 | | IMS 4 | CLAIMS 3 | |
| ADDRESS 51298 CRAWFORD MAL 1270 NORTHLAN SUITE 390 ST. PAUL , MN 55120 | | | | | | | | | | |
| TITLE Method and appar | ratus f | for providing generalize | ed write p | re-compensat | ion | | | Characteristic | | |
| | | | | | | ☐ All Fees | | | | |
| I N | No to charge/credit DEPOSIT ACCOUNT No for following: | | | | | ☐ 1.16 Fees (Filing) ☐ 1.17 Fees (Processing Ext. of time) ☐ 1.18 Fees (Issue) ☐ Other | | | | |
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